

Attorney's Docket No. GATEP002

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Electronic File Protection Using Location, the specification of which,

(check one)	1.	is attached hereto.		
	2.	was filed on		as
		U.S. Application S	erial No	
			on	
	3.	was filed on		as
		International PCT	Application Serial No	
		and was amended of	on	<del>.</del>
I hereby state that	I have review	ed and understand th	ne contents of the above-identif	fied specification, including the claims, as
arriended by any an	nendment refer	red to above.		
	duty to disclos	e information which	is material to the examination of	of this application in accordance with Title
37, CFR § 1.56.	·			••
	ign priority be	nefits under Title 35.	United States code, § 119(a)-(c	d) or § 365(b) of any foreign application(s)
				which designated at least one country other
				ox, any foreign application for patent or
"	te, or PCT Int	ernational applicatio	n having a filing date before th	nat of the application on which priority is
ç <u>la</u> imed:				
Prior Foreign App	lication(a)		•	Deignitus Danasita Claima 42
*1 m(1)	incation(s)			Priority Benefits Claimed?  Yes No
(Appl. No.)	<del></del>	(Country)	(Filing Date)	
i ali				Yes
(Appl. No.)	····	(Country)	(Filing Date)	
				Yes No
(Appl. No.)		(Country)	(Filing Date)	
I haraby alaim the b	onofit under 2	5 II S C 8110(a) of	any United States provisional ap	plication(c) listed below:
Thereby Claim the C	belletit ullder 5	5 0.5.C. §115(c) 01 a	ary Office States provisional app	pheadon(s) listed below.
60/296,923		<u>June 8, 20</u>	01	
(Application Serial	No.)	(Filing Date)		
60/245,491		November 3, 2000		
(Application Serial	No.)	(Filing Da	ite)	
(Application Serial	No.)	(Filing Da	uta)	
(Application Serial	INU.)	(Fining Da	<i>)</i>	

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:



## Prior U.S. Application(s)

Post Office Address:

09/948,730	September 7, 2001	Pending		
(Application Serial No.)	(Filing Date)	(Status - patented, pending, abandoned)		
(Application Serial No.)	(Filing Date)	(Status - patented, pending, abandoned)		
(Reg. No. 39,487); Chester E. Ma (Reg. No. 46,021); Rick von Wo	ortine, Jr. (Reg. No. 19,711); Edm hld (Reg. No. 48,018); and Mich	g Peter B. Martine (Reg. No. 32,043); Albert S. Penilla nund H. Mizumoto (Reg. No. 46,938); Joe A. Brock I ael L. Gencarella (Reg. No. 44,703), as my principa Patent and Trademark Office connected therewith:		
Send Correspondence To:	710 Lakeway Drive, S Sunnyvale, CA 94085	Joe A. Brock II, Esq. MARTINE & PENILLA, LLP 710 Lakeway Drive, Suite 170 Sunnyvale, CA 94085 Customer Number 25920		
Direct Telephone Calls To:	Joe A. Brock at telephone	Joe A. Brock at telephone number (408) 749-6900		
	Dube	ction 1001 of Title 18 of the United States Code, and that on or any patent issuing thereon.  Citizenship:  Date of Signature:  (State/Country) Florida		
Post Office Address: <u>2655 NW</u>	/ 29th Drive, Boca Raton, FL 3343	4		
isk Full Name of Second Joint Inventor (if any):		Citizenship:		
Inventor's signature:		Date of Signature:		
Residence: (City)		(State/Country)		
Post Office Address:				
Full Name of Third Joint Inventor (if any):		Citizenship:		
Inventor's signature:		Date of Signature:		
Residence: (City)		(State/Country)		